

# Form CPF M 102: Campaign Finance Report

Municipal Form Office of Campaign and Political Finance

ith: r Town Clerk or Election Commission Pl					4/	12. "FC!
· · · · · · · · · · · · · · · · · · ·	ease print or type	all informatio	n, except sign	atures.		So, TEA
ill in dates:  Mornth Leporting Period Beginning Oct	Date 22	2 <u>011</u>	Ending	Month De	Dute 3/	1.26 D 3.44
Type of report: (Check one)  Sth day preceding preliminary	8th day preceding	g election 🛚	30 day after e	lection 5	☑year-end repo	rt
Full Name of Candidate (if a City Councillar Office Sought and Dist 25 Un Colo St. F. Tr.  Residential Address (978) 257-9020	rict		ne R. J. Name of	, Fitch	Name ce Treasurer ling Address	s. (optional)
Line 1: Ending by Line 2: Total records Line 3: Subtotal Line 4: Total exp Line 5: Ending by Line 6: Total in-k Line 7: Total (all) Line 8: Name of 1	ceipts this per line 1 plus line 2 penditures the palance (line 3 ind contribute outstanding	previous eriod (page 2 2) his period minus line 4) tions this p	report , line 11) (page 3, line eriod (page	\$_ \$_ \$_ \$_ \$_ 4) \$_ \$_	167.25 0.00 167.25 0.00 167.25 0.00 460.00	
Affidavit of Committee Treasurer: I certify that I have examined this report include finance activity, including all contributions, loss campaign finance activity of all persons acting to the finance activi	ns, receipts, expenditui inder the authority or (	s and it is, to the be res, disbursements, on behalf of this co ler the penalties o	mmittee in accord	ge and belief, ons and liabil ance with the	a true and complete ities for this reportin requirements of M.C.	statement of all campa g period and represents 3.L. c. 55.
FOR CAN	DIDATE FIL	INGS ONL	Y: (CANDIDA	te must si	IGN BELOW)	

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only limite those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

muliber on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more	
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Line 9:	Total receipts in excess of \$50 (or listed above)	0	OD		
	Total receipts \$50 and under* (not listed above)	U	00		
	TOTAL RECEIPTS IN THE PERIOD	0	00	Enter on page 1, line 2	

<sup>•</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

## SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

mber on each	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amou	nt
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		Liı	ne 12: Expenditures over \$50	0	0
		Li	ne 13: Expenditures \$50 and under*		10
	Enter on page 1, line 4	Li	ne 14:TOTAL EXPENDITURES n line 12. Line 13 should include only	0	1

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

#### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be

added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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		Line 15:	In-kind over \$50	10.00
			In-kind \$50 and under	10.00
	Enter on page 1, line 6	Line 17:	Total In-kind	1/7.00

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

### SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
8/8/2011	John Triolo as Lincol St, Fitchburg	25 Lincoln ST Fitching MA 01420	Loun from Candidate	\$60.00
4/12/2011	John Triolo 25 Lincol of Etdour	N	()	\$400.00
			•	
<u></u>	Enter on page 1, line 7	Line 18: OUTSTANDING	TANDITITIES (ALL)	8460.00

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page Page 4 printed on recycled paper number on each page.